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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/642,628
		Filing Date	August 19, 2003
		First Named Inventor	Michael P. DALLYMEYER et al.
		Art Unit	3752
		Examiner Name	Hwu, Davis D.
Total Number of Pages in This Submission		Attorney Docket No.	2003P12570US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 (CFR) 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s), please identify below:
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Chad D. Wells, Reg. No. 50,875, HELLER EHRLMAN, LLP
Signature	
Date	December 1, 2005

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name		
Signature	Date	

This collection of information is required by 37 C.F.R. 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions by reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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COMBINED FEE TRANSMITTAL for FY 2005

Effective 12/08/2004. Patent fees are subject to annual revision.

PTO/SB/17 (12-04) (Revised) (For payment of 37 CFR 1.17 fees including (f), (g), (h), & (i))

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$450.00)

Complete if Known	
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DEC 01 2005
TRADEMADE

METHOD OF PAYMENT (check one)

<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
<input type="checkbox"/> Deposit Account				

Deposit Account Number: 08-1641

Deposit Account Name: Heller Ehrman White & McAuliffe LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below
 Credit any overpayments and charge any deficiencies
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the deposit account

FEE CALCULATION (continued)

4. PETITION FEES UNDER 37 CFR 1.17 (f) Fee Code: 1462 Fee \$ 400 For petitions filed under: § 1.53(e); § 1.57(a); § 1.182; § 1.183; § 1.378(e); § 1.741(b)	Fee Paid 0.00
5. PETITION FEES UNDER 37 CFR 1.17 (g) Fee Code: 1463 Fee \$ 200 For petitions filed under: § 1.12; § 1.14; § 1.47; § 1.59; § 1.103(a); § 1.136(b); § 1.295; § 1.296; § 1.377; § 1.550(c); § 1.956; § 5.12; § 5.15; § 5.25	Fee Paid 0.00
6. PETITION FEES UNDER 37 CFR 1.17 (h) Fee Code: 1464 Fee \$ 130 For petitions filed under: § 1.19(g); § 1.84; § 1.91; § 1.102(d); § 1.138(c); § 1.313; § 1.314	Fee Paid 0.00
7. PROCESSING FEES UNDER 37 CFR 1.17 (i) Fee Code: 1808 (1803 for § 1.221) Fee \$ 130 For petitions filed under: § 1.28(c)(3); § 1.41; § 1.48; § 1.52(d); § 1.53(b)(3); § 1.55; § 1.99(e); § 1.103(b); § 1.103(c); § 1.103(d); § 1.217; § 1.221; § 1.291(c)(5); § 1.497(d); § 3.81	Fee Paid 0.00

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES				Entity Fee (\$)	Entity Fee (\$)	Fee Description	Fee Paid
Application Type	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)		50	25	Surcharge - late provisional filing fee or cover sheet	
Utility	300	150	500	250	200	100	0.00	2,520	2,520		For filing a request for <i>ex parte</i> reexamination	
Design	200	100	100	50	130	65	0.00	920*	920*		Requesting publication of SIR prior to Examiner action	
Plant	200	100	300	150	160	80	0.00	1,840*	1,840*		Requesting publication of SIR after Examiner action	
Reissue	300	150	500	250	600	300	0.00	120	60		Extension for reply within first month	
Provisional	200	100	0	0	0	0	0.00	450	225		Extension for reply within second month	450.00
SUBTOTAL (1)				\$ 0.00				1,020	510		Extension for reply within third month	

2. EXTRA CLAIM FEES

Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Entity Fee (\$)	Entity Fee (\$)	Fee Description	Entity Fee (\$)	Entity Fee (\$)	Fee Description
50	25	Each claim in excess of 20 or, for Reissues, each claim in excess of 20 and more than in the original patent	500	250	Surcharge - late filing fee or oath	2,160	1,080	Extension for reply within fifth month
200	100	Each independent claim in excess of 3 or, for Reissues, each independent claim more than in the original patent	920*	920*	For filing a request for <i>ex parte</i> reexamination	920*	920*	Requesting publication of SIR prior to Examiner action
360	180	Multiple dependent claim, if not already paid	1,840*	1,840*	Requesting publication of SIR after Examiner action	1,510	1,510	Extension for reply within second month

Extra Claims		Fee from above	Fee Paid					
Total Claims	21	-28** = 0	50.00	= 0.00	500	250		Petition to revive - unavoidably abandoned application
Independent Claims	1	-3** = 0	200.00	= 0.00	500	250		Petition to revive - unintentionally abandoned application

** or number previously paid, if greater; For Reissues see below

Multiple Dependent	360.00	= 0.00	500	250	Petition to revive - unavoidably abandoned application
SUBTOTAL (2)		\$ 0.00	500	250	Petition to revive - unintentionally abandoned application

Other fee (specify)	500	250	Petition to institute a public use proceeding
	500	250	Processing fee for provisional appls (37 CFR 1.17(q))
	180	180	Request for oral hearing
	180	180	Submission of Information Disclosure Statement

Other fee (specify)	500	250	Request for Continued Examination (RCE)
	500	250	Request for expedited examination of a design application
	500	250	For each additional invention to be examined (37 CFR 1.129(b))

	500	250	Request for Continued Examination (RCE)
	500	250	Request for expedited examination of a design application
	500	250	For each additional invention to be examined (37 CFR 1.129(b))

	500	250	SUBTOTAL (4+5+6+7+8)	\$ 450.00
	500	250	* Reduced by Basic Filing Fee Paid	

SUBMITTED BY	Complete (if applicable)
Name (Print/Type)	Chad D. Wells
Signature	Chad D. Wells

Date December 1, 2005

Customer No. 26633